

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10/604004

CLAIMS AS FILED - PART I			SMALL ENTITY		OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)				
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEES	RATE	FEES
BASIC FEE (37 CFR 1.16(a))				\$ _____		
TOTAL CLAIMS (37 CFR 1.16(c))	20	minus 20 = * _____	x \$ _____ =			
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 = * _____	x _____ =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ _____ =			
			TOTAL	375	OR TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II			SMALL ENTITY		OTHER THAN SMALL ENTITY		
(Column 1)		(Column 2)	(Column 3)				
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	* 20	Minus	** 20 =	x \$ _____ =		
	Independent (37 CFR 1.16(b))	* 3	Minus	*** 3 =	x _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =			
				TOTAL			
				ADDITIONAL FEE			

			(Column 1)	(Column 2)	(Column 3)	ADDITIONAL FEE	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	* _____	Minus	** _____ =	x \$ _____ =		
	Independent (37 CFR 1.16(b))	* _____	Minus	*** _____ =	x _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =			
				TOTAL			
				ADDITIONAL FEE			

			(Column 1)	(Column 2)	(Column 3)	ADDITIONAL FEE	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	* _____	Minus	** _____ =	x \$ _____ =		
	Independent (37 CFR 1.16(b))	* _____	Minus	*** _____ =	x _____ =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =			
				TOTAL			
				ADDITIONAL FEE			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U. S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Best Available Copy